

N94 000000 1615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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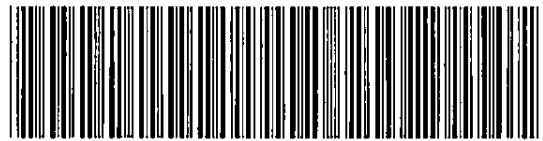
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MAGNOLIA VILLAGE HOMEOWNERS ASSOCIATION OF
Name of Corporation EDGEWATER, INC.

DOCUMENT NUMBER: N 94000001615

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARGARET WIGMORE
Name of Contact Person

Firm/Company

1802 PERSIMMON CIRCLE
Address

EDGEWATER FL 32132
City/State and Zip Code

E-mail address: (to be used for future annual report notification) MARGARET WIGMORE@HOTMAIL.COM

For further information concerning this matter, please call:

MARGARET WIGMORE at (856) 986-4858
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MAGNOLIA VILLAGE HOMEOWNERS ASSOCIATION OF
EDGEWATER, INC.

2. The principal office address: 1802 PERSIMMON CIRCLE
EDGEWATER FLORIDA 32132

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/28/1994 Document number: N94 000001615

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

PAPPAS, GEORGE S
213 SILVER BEACH AVE.
DAYTONA BEACH, FL 32118

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JEREMY V. ANDERSON, ESQUIRE
1689 MAHAN CENTER BLVD., SUITE B.1
P.O. Box NOT acceptable
TALLAHASSEE, FLORIDA 32308

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Margaret Wigmore Treasurer
Signature of an officer or director

MARGARET WIGMORE TREASURER
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

11/22/24
Date

If signing on behalf of an entity:

Jeremy V. Anderson
Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32316

CR2E045 (04/13)

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